

Western MRS Meeting Notes
February 20, 2007
AB Tech Enka Campus

Counties Present: Buncombe, Caldwell, Catawba, McDowell, Mitchell, Polk, Rutherford, Transylvania

Introductions

Announcements

Overview of At Risk Case Management

Services Provided vs. Services Recommended

Family Assessments for Foster Homes

Announcements

- Proposed legislation: proposed an additional amount of funds for DV and TANF
- New Chapter 8 manual is on line – in upcoming months we will talk about any tweaks that the policy may need.

Overview of ARCM

Rick Zechman from the policy team presented on this. Has handouts regarding policy and a powerpoint. Can contact him for more information.

- May not know what this is, it is a resource from the Division of Medical Assistance for adults as well as children.
- Goes well with Services Provided and Services Recommended.
- The organization for this is very different. Some counties have workers that this is all they do.
- Easy eligibility is having a blue Medicaid card – no other color cards will work.
- Specific eligibility is in policy – page 3.
- Can't use this when the children are in foster care. Can use it in some cases of in-home services, but have to be very careful and be able to show a clear difference between what you are using the at-risk case management for that regular in-home services is not doing. (Remember that in-home is defined as a child who is a reasonable candidate for foster care.) Just be sure that you can document the specific reasons for using at-risk case management.
- It is a voluntary services so the family has to sign the 5027. Coded 395 in SIS manual.
- Rick showed an example of an assessment form that was developed my Medicaid – counties have been using this as a guide and making ones specific to their counties.
- We are doing this in partnership with Division of Aging and Adult Services so there may be other requirements for adults.
- The powerpoint gets into more details regarding documentation and monitoring requirements.
- If your county is not currently doing this, before you try to use it you need to ensure that you are certified to provide it. Most probably are, but there may be some that are not.
- This would be a way to provide services in a Services Recommended case. You don't want to recommend services to a family and then not have any

funds to provide these services. So, you could use these funds to provide these services.

- Remember that these services must be 100% voluntary. Cannot use these funds if there are any mandates around the services that you are providing.

Services Provided vs. Services Recommended

Wanted to have a conversation about how these were being used. Looked at percentages of family assessments that were Services Provided, CPS Services no longer Needed vs. Services Recommended.

- Mitchell – the way they look at Services Provided. When they concentrate a frontloading of services and if the risk has dropped acceptably by case decision they find Services Provided.
- Caldwell – probably should use Services Provided more than they do, but they are used to Services Recommended
- Buncombe – Part of the original 10. There was a strong feeling back in the day that any type of referral was Services Recommended. (No matter how “minor” the services were. You could make a referral that was not relating to a safety issue – like Big Brother Big Sisters and the original 10 decided that would count as Services Recommended instead of No Services Recommended.)
- If you have provided services when you frontloaded that were safety related and if you had not provided them they would have gone to 215, that is Services Provided. If you are providing services that are helpful but are not safety related, that is Services Recommended.
- Is the service/referral safety related or not? This is the criteria. If it is, that is Services Provided. If it is not, it is Services Recommended.
- Services Provided, CPS Services no Longer Needed – if you had not made XYZ referrals and they had not followed up, would you have ever sent the case to 215? If not, it is only Services Recommended.

Family Assessments for Foster Homes

People have asked Holly why we treat foster care families differently. Most of these questions have come from foster care licensing folks.

- But, some counties feel that the foster families have been given more resources and training (MAPP) than a family out in the community and so we can hold them to a different standard. The community and DSS should hold them to a higher standard.
- Can argue it both ways, but agree that the findings should be substantiated or unsubstantiated, although would like some more flexibility in responding to calls (being able to call first and things like that.)
- There is nothing that says you can't do this now, (call etc.) but people don't think about it
- Don't mind the more family centered approach, but don't want the expanded findings available in family assessments
- Also, even if the child reported on is the foster parents own child you can't take that as a family assessment because all children in the home are considered victims.
- Foster Parents are more vulnerable to reports because everyone is looking at them. Putting kids in care that have many issues and may be manipulative, as well as their birth parents.

- Some people may be in a situation where someone is calling in false reports and so the foster parents are in the central registry several times, although unsubbed each time. Some people think where there is smoke there is fire.
- If you were a foster parent do you feel that you are being partnered with if someone sends you a letter that they have been substantiated as neglectful? How will that feel for them?
- It's not going to feel good, but it doesn't feel good for regular families anyway.
- This is really a cross county issue anyway because you won't be doing your own foster care assessments. Polk may wish to do FC assessments as family assessments, but Buncombe will actually do the assessment so if they do it Investigative that will cause issues between counties.
- Only one county here really wanted the choice. But agreed that maybe putting into writing more family centered approaches were ok (calling the family) would be good.

Risk Assessment and Risk ReAssessment

- If we are supposed to do these forms with the family why is the language so not family centered? How do you tell a family that you are giving them points because they are apathetic and hopeless?
- Even if you reword the question for them, you have to give them a copy of the form they will see it.
- Still want a place for the family to sign the form.
- The risk reassessment is dangerous. This tool allows you to lower the risk when it is not really because of the structure of the tool vs the assessment. Especially with new workers this is a problem because they are using the tool that the state asks them to use. Doesn't ask the same questions that the risk assessment asks so you can't get the same picture. (Example: No DV question.)
- Leads to a lot of supervisory overrides.

What do you do about Driver's Licenses for Kids in Foster Care?

- Can't get licenses because they can't get insurance.
- Although Holly thinks that LINKS will pay for that who's policy will they go on?
- The problem is that we end up with kids who are 18 and out on their own and don't have a license which hinders their getting a job and other stuff.
- Mitchell county has found a way for them to get a permit until 18 and at 18 LINKS will pay for their own policy.
- Kids in Independent Living group homes drive, so how did they get their license?
- Is the expectation from the state that the county deal with it?

Future Meetings:

Western –

April – April 24th here

May – May 24th – Black Mountain Library